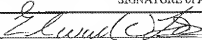


HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY and CHANGE OF CORRESPONDENCE ADDRESS</b>		<i>Application/Patent Number</i>	7,687,682 B2
		<i>Filing/Issue Date</i>	March 30, 2010
		<i>First Named Inventor/Patentee</i>	George N. Serbedzija
		<i>Confirmation Number</i>	1627
		<i>Group Art Unit</i>	1632
		<i>Examiner Name</i>	Valarie E. Bertoglio
		<i>Attorney Docket Number</i>	3262.1000-020
<i>Title</i>	Methods of Screening Agents for Activity Using Telecasts		
I hereby revoke all previous powers of attorney given in the above-identified application.			
<input type="checkbox"/> I hereby appoint the following practitioner(s): <u>[Not to exceed 10]</u>			
OR			
<input checked="" type="checkbox"/> I hereby appoint the practitioners associated with the Customer Number: <b>021005</b>			
Please change the correspondence address for the above-identified application to:			
<input checked="" type="checkbox"/> <b>Customer Number 021005</b> Hamilton, Brook, Smith & Reynolds, P.C. 530 Virginia Road P.O. Box 9133 Concord, Massachusetts 01742-9133			
<input type="checkbox"/> Other _____			
Please direct all telephone calls and facsimiles to:			
Name <u>David E. Brook</u>		Tel. No. <u>(978) 341-0036</u>	Fax No. <u>(978) 341-0136</u>
I am the:			
<input type="checkbox"/> Applicant/Inventor.			
<input checked="" type="checkbox"/> Authorized representative of the Assignee, Phylonix Pharmaceuticals, Inc., of the entire interest. See 37 CFR § 3.71. A Statement under 37 CFR § 3.73(b) is enclosed.			
<input type="checkbox"/> Authorized representative of the Assignee, [ FILL IN WITH NAME OF ASSIGNEE ], together with [ FILL IN WITH NAME OF ASSIGNEE ], of the entire interest. A Statement under 37 CFR § 3.73(b) is enclosed.			
SIGNATURE of Applicant or Assignee of Record			
Signature			
Name & Title	Edward O'Lear, Vice President & CFO		
Date	12/07/2010		